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To: Examiner Andre K. Jackson      Fax : (571) 273-2196  
U.S. Patent Office      Phone:

From: L. Grant Foster      Fax : (801) 364-9124  
Phone: (801) 595-7830

Message: Please see accompanying document.

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Number of pages including cover sheet: 21

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Attorney Number:	5144	Client/Matter:	46263.0004	Time Deadline:	
Operator Initials:	KC	Date Transmitted:	10-14-04	Time Transmitted:	

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Holland & Hart LLP Attorneys at Law

Phone (801) 595-7800 Fax (801) 364-9124 [www.hollandhart.com](http://www.hollandhart.com)

60 E. South Temple Suite 2000 Salt Lake City, Utah 84111-1031

Aaron Billings Boise Boulder Cheyenne Colorado Springs Denver Denver Tech Center Jackson Hole Salt Lake City Santa Fe Washington, D.C.

PAGE 1/21 \* RCVD AT 10/14/2004 5:35:08 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-3/26 \* DNIS:2732196 \* CSID:801 578 6010 \* DURATION (mm:ss):04:42

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

OCT 14 2004

U.S. PATENT APPLICATION SERIAL NO. .... 09/905,761  
 FILING DATE ..... 13 July 2001  
 INVENTORS ..... Gaylon S. Campbell et al.  
 ASSIGNEE ..... Decagon Devices, Inc.  
 GROUP ART UNIT ..... 2856  
 EXAMINER ..... Andre K. Jackson  
 ATTORNEY'S DOCKET NO. .... 46263.0004  
 TITLE ..... "Moisture Detection Apparatus and Method"

TRANSMITTAL LETTER AND CERTIFICATE OF FACSIMILE TRANSMISSION

To: Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

From: L. Grant Foster  
 HOLLAND & HART LLP  
 555 - 17<sup>th</sup> Street, Suite 3200  
 P.O. Box 8749  
 Denver, CO 80201  
 Telephone: (801) 595-7830  
 Facsimile: (801) 364-9124

Transmitted herewith are the items listed below submitted regarding the matter identified above:

1. Transmittal Letter with Certificate of Facsimile Transmission included
2. Amendment
3. Fee Calculation Sheet

**Deposit Account Authorization** - The Commissioner is hereby authorized to charge payment of or credit any applicable fees to Deposit Account No. 08-2623.

Date: 14 October 2004

By:   
 L. Grant Foster  
 Registration No. 33,236

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify the items listed above are being sent via facsimile (facsimile number (571) 273-2196 on the below indicated date to the Commissioner for Patents, Attention: Examiner Andre K. Jackson, Art Unit 2856.

Date: 14 October 2004

Signature:   
 Name: Kathy Case

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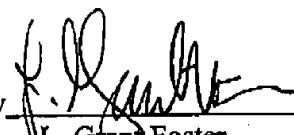
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APPLICANT'S CALCULATION OF TOTAL FEES DUE							
FEE TYPES							
BASIC FEE (\$750/375)							
CLAIMS FEES	Number of Claims Remaining After Any Amendments	Minus the Larger		Excess Claims For Which Fees Have Been Paid	Times Rate (\$)		
		Number Allowed in Base Fee	Equals		Large Entity	Small Entity	
Total Claims	15	20	20	0	18.00	9.00	0.00
Indep. Claims	4	3	4	0	84.00	42.00	0.00
<b>EXTENSION PETITION/FEES (\$)</b> Applicant hereby petitions for an extension of time for response under 37 CFR 1.136(a) as indicated or as necessary to maintain the pendency of this application.				One month	110.00	55.00	
				Two months	410.00	205.00	
				Three months	930.00	465.00	
				Four months	1,450.00	725.00	
				Five months	1,970.00	985.00	
ANY OTHER FEES							
TOTAL FEES OWED							\$ 0.00

**Deposit Account Authorization** - The Commissioner is hereby authorized to charge any necessary payments or credit any applicable fees to Deposit Account No. 08-2623.

Date: 14 OCTOBER 2004

By   
L. Grant Foster  
Registration No. 33,236

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